## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

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ATTORNEY'S DOCKET NUMBER

PHNL030724 US

As a below named inventor, I h	ereby declare that:		
My residence, post office addre	ss and citizenship are as state	ed next to my name.	
		name is listed below) or an original, firs claimed and for which a patent is soug	
the specification of which (chec ☐ is attached hereto.	k only one item below):		
☐ was filed as United States a	pplication		
Serial No		<u> </u>	
on			
and was amended			
on			
✓ #! DOT :			
was filed as PCT internation	al application	*	
Number <u>PCT/IB2004/0509</u>	959		·
On 22 June 2004			
and was amended under PCT	Article 19		
on			(if applicable).
I hereby state that I have review claims, as amended by any am		nts of the above-identified specification	n, including the
l acknowledge the duty to discle Title 37, Code of Federal Regul		rial to the examination of this application	on in accordance with
or inventor's certificate or of an States of America listed below any PCT international application	y PCT international applicatior and have identified below any on(s) designating at least one	States Code, § 119 of any foreign apple (s) designating at least one country of foreign application(s) for patent or invector than the United States of the application(s) of which priority is constructed.	ther than the United entor's certificate or f America filed by me
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 119:	
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	03101884.9	25 June 2004	YES
	L	DEDARTMENT OF COMMERCE Patrate	<del></del>

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Combined Declaration For Patent Application and Power of Attorney (Continued)  Attorneys Docket Number PHNL030724 US					
		Y: As a named inventor, I hereby appoint and Trademark Office connected therewith		umber)	
	E. Haken, Reg.			Direct Telepho	ne Calls to:
	ael E. Marion, Ro ard M. Blocker, F		(914)332-0222		
Luwa	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	<u> </u>	SECOND GIVEN NAME
	INVENTOR	VULLERS	Rudolf		Johan Maria
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	CITIZENSHIP	Eindhoven	The Netherlands		The Netherlands
	POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COUNTRY
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	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR	VAN SOMEREN	Bob		
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	CITIZENSHIP	's-Hertogenbosch			The Netherlands
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	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR	ZIJP	Ferry		
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	CITIZENSHIP	Eindhoven	The Netherlands		The Netherlands
	POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhov	en	The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
A	Brunds Many	
DATE 17 January 2005	DATE 17 January 2005	DATE

SIGNATURE OF INVESTOR-204

DATE

17 January 2005

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL030724 US

As a below named inventor, I	hereby declare that:		
My residence, post office add	ress and citizenship are as sta	ated next to my name.	
I believe I am the original, first plural names are listed below) entitled:	t and sole inventor (if only one of the subject matter which is	name is listed below) or an original, first claimed and for which a patent is sou	rst and joint inventor (if ght on the invention
the specification of which (che	eck only one item below):		
☐ was filed as United States	application		
Serial No			
on			
and was amended			
on			
was filed as PCT internatio	nal application	•	
Number <u>PCT/IB2004/050</u>	959		
On 22 June 2004			
and was amended under PCT	Article 19		
on			(if applicable).
I hereby state that I have revie claims, as amended by any an	wed and understand the contentent referred to above.	ents of the above-identified specificatio	n, including the
I acknowledge the duty to disc Title 37, Code of Federal Regu	lose information which is mate llations, § 1.56(a).	rial to the examination of this application	on in accordance with
or inventor's certificate or of an States of America listed below any PCT international applicati	ny PCT international application and have identified below any on(s) designating at least one	States Code, § 119 of any foreign applin(s) designating at least one country or foreign application(s) for patent or invicountry other than the United States of the application(s) of which priority is c	ther than the United entor's certificate or of America filed by me
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIOR	ITY CLAIMS UNDER 35 U.S.C. 119:	
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	03101884.9	25 June 2004	YES
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Com	ained Dealerstie	- Far Datant Applia	otion and Day		-17	Attornova Docket Number
Combined Declaration For Patent Application and Power of Attorney (Continued)  Attorneys Docket Number PHNL030724 US						
POWI	ER OF ATTORNE iness in the Patent a	Y: As a named inventor and Trademark Office co	r, I hereby appoint pnnected therewith	the following attorney(s) and/on. (List name and registration n	or agent(s) to pro umber)	secute this application and transact
Micha	E. Haken, Reg. ael E. Marion, R	eg. No. 32,266			Direct Telepho (name and tele (914)332-02	ephone number)
Edward M. Blocker, Reg. No. 30,245 FULL NAME OF FAMILY NAME			FIRST GIVEN NAME		(011)002 02	SECOND GIVEN NAME
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	FULL NAME OF INVENTOR	FAMILY NAME VAN SOMEREN		FIRST GIVEN NAME  Bob		SECOND GIVEN NAME
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· · · · · · · · · · · · · · · · · · ·	FULL NAME OF INVENTOR	FAMILY NAME ZIJP		FIRST GIVEN NAME Ferry		SECOND GIVEN NAME
204	RESIDENCE &			STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
	CITIZENSHIP			The Netherlands		The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6		5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY  The Netherlands
true: a impriso	nd further that these	e statements were made der section 1001 if Title	with the knowledge	ge that willful false statements	and the like so m	formation and belief are believed to be nade are punishable by fine or ts may jeopardize the validity of the
SIGNA	TURE OF INVENT	OR 201	SIGNATURE OF	F INVENTOR 202	SIGNAT	URE OF INVENTOR 203
						3-v Somer
DATE DATE		DATE	DATE		0 January <i>2</i> 005	
SIGNA	TURE OF INVENT	OR 204				

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(July 1994)

DATE